## PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

	ed below or directed oth					e current correspondence address ting a separate "FEE ADDRESS"
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  30678 7590 06/10/2008  CONNOLLY BOVE LODGE & HUTZ LLP 1875 Eye Street, NW Suite 1100  Washington, DC 20006				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE	FIRST NAM	IED INVENT	OR	ATTORNEY DOCKET NO	O. CONFIRMATION NO.
10/599,894 03/08/2007		David 1	David Mainwaring		21854-00075-US1	6101
TITLE OF INVENTION	I: Fabricated Strain	Sensor				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICA	TION FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	No	\$1,440.00	\$30	00.00	\$1,740.00	09/10/2008
EXAMINER		ART UNIT	CLASS-S	UBCLASS		
Dunlap, Jonathan M.  1. Change of correspondence address or indication		2855				
Address" (37 CFR 1.363 Change of correspondence "Fee Address" in form PTO/SB/47 Use of a Custom 3. ASSIGNEE NAME A PLEASE NOTE: Unle	espondence address (or Address form PTO/SB/1 dication (or "Fee Address; Rev 03-02 or more receier Number is required. ND RESIDENCE DATASS an assignee is identificated in 37 CFR 3.11. Confee	Change of 22) attached. s' Indication ent) attached. A TO BE PRINTED ON The debelow, no assignee data with the properties of this form is NO.	ames of up ragents OR, a see of a single fal attorney or istered patent ed, no name when PATENT will appear on T a substitute	irm (having as agent) and the attorneys or agorill be printed.  (print or type) the patent. If a for filing an as CE: (CITY and	a member 2 names of ents. If no 3	Bove Lodge & Hutz LLP  w, the document has been filed
•	•	ories (will not be printed on the		Individual	X Corporation or other priva	te group entity Government
4a. The following fee(s)  X Issue Fee  X Publication Fee ( Advance Order	permitted) X Paym X The I	4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  X Payment by credit card. Form PTO-2038 is attached.  X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, Deposit Account Number 22-0185			), or credit any overpayment, to	
5. Change in Entity Sta	itus (from status indicate	d above)	_			
a. Applicant clair	ns SMALL ENTITY sta	tus. See 37 CFR 1.27.	b. Applica	ant is no longer	r claiming SMALL ENTITY	status. See 37 CFR 1.27(g)(2).
NOTE: The Issue Fee and I	Publication Fee (if require				viously paid issue fee to the ap nt; a registered attorney or age	plication identified above. nt; or the assignee or other party in
Authorized Signature /Mon		/Morris Liss/	ris Liss/		DateS	eptember 4, 2008
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